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FAX TRANSMISSION

То	USPTO Commissioner for Patents
Examiner	Kahsay Habte
Fax Number	(571) 273-8300
From	Karen E. Brown
Date	November 16, 2005
Application No.	10/700,938
Attorney Docket No.	VPV02-123US
•	Supplemental Amendment
Total Pages	- 2H
Magazas or Comment	

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence and any documents attached hereto, are being transmitted via facsimile to the United States Patent and Trademark Office. Facsimile Number (571) 273-8390 on Movember 16, 2005.

Lisa M. Romano

If any problems occur with this fax transmittal, please call (617) 444-6164 immediately.

FAX Number (617) 444-6483 Legal Department

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VPI/02-123 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.:

10/700,936

Confirmation No.:

5983

Filing Date:

November 4, 2003

Examiner:

Kahsay Habte

Group Art Unit:

1624

Applicants:

Randy S. Bethiel et al.

For:

COMPOSITIONS USEFUL AS INHIBITORS OF JAK AND OTHER

PROTEIN KINASES

November 16, 2005 Cambridge, Massachusetts

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: [X] Supplemental Amendment; [] a Petition for Extension of Time; [] a substitute Specification; [] a Declaration; [] a Supplemental Declaration; [] a Power of Attorney; [] an Associate Power of Attorney; [] formal drawings; to be filed in the above-identified patent application.

FEE FOR ADDITIONAL CLAIMS

- [X] A fee for additional claims is not required.
- [] A fee for additional claims is required.

The additional fee has been calculated as shown below:

CLAIMS REMAINING AFTER AMEN <u>DMENT</u>		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA			ADDITIONAL FEES	
TOTAL CLAIMS	0		0	+ =	0	X \$ 18 =		0
INDEPENDENT CLAIMS	0	-	3	¥0 p	0	X \$ 84 =	\$	0
FIRST PRESENTA MULTIPLE DEPE	TIO NDE	N OF A NT CLAI	м			+ \$280 =	s	

If less than 20, insert 20.

TOTAL \$__0

- [] A check in the amount of \$__ in payment of the filing fee is transmitted herewith.
- [X] The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.
- Please charge \$___ to Deposit Account No. 50-0725 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

^{+*} If less than 3, insert 3.

EXTENSION FEE

- The following extension is applicable to the Response filed herewith; [] \$120.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a); [] \$450.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); [] \$1,020.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); [] \$1,590.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136(a); \$2,160.00 within fifth month pursuant to 37 C.F.R. § 1.136(a).
- A check in the amount of [] \$120.00; [] \$450.00; [] \$1,020.00; [] \$1,590.00; [] \$2,160.00 in payment of the extension fee is transmitted herewith.
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Karen E. Brown

Reg. No. 43,866

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IDEPENDENT LAIMS	0		3	#7 =	0	X \$ 84 -	\$	
RST PRESENTA TULTIPLE DEPE	TIO	N OF A NT CLAI	IM			+ \$280 =	\$	

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